

(Print Name of lobbyist)

PLEASE PRINT

STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

JAN 3 0 2019

NEW HAMPSHIRE DEPARTMENT OF STATE

1. Name of Loboyist(s):	Worsowicz	iapiro, Fil.D., Erik W. Taylor, Faul A.
II. Name of Lobbyist's part	nership, firm or corporation, if any:	·
(02.220.1101	GALLAGHER, CALLAHAN 214 North Main Street, Co	ncord, NH 0330I
603-228-1181 (Telephone)	603-226-3334 (Fax)	4 pfundstein@gcglaw.com (Email)
III. This statement covers:	, ,	r each client, OR you may file a separate report for
		reporting date relative to the following client.
	NORTHERN PASS TR	ANSMISSION
(Fi	Ill Name of Client as it appears on the L	obbyist Registration Form)
All reportable transac unrelated to any partic		yist's family), or the lobbying firm listed below which a
IV. Date of Report:	April 25, 2018 🔲	July 25, 2018 □
•	from date of registration to 3/31/18	activity from 4/1/18 to 6/30/18
	October 31, 2018	January 30, 2019 🗵
	y from 7/1/18 to 9/30/18	activity from 10/1/18 to 12/31/18
	received and no reportable transaction to the Security to the Security it it it it is the Security it is the	os made since the last report. X retary of State's Office, State House, Room 204,
VI. Check if additional rep If you have received if	orts are attached: ees or made expenditures, you must file	. Addendum A – Fees and Expenses
Expense Reimbursem	ent	must file Addend um B – Report of Honorariums or ons, you must file Addend um \mathbb{C} – Political Contributio
Sworo Statement/Affirmation I have read RSA 15, RSA 15- to the best of my knowledge a	B and RSA 664 and hereby swear or aff	Firm that the foregoing information is true and complete
(Signature of Lobbyrst)	M	/2F/19 (Date)
Donald I Pfundstein		/ * ·



STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s)	Donald J. Pfundstein, Lisa K. Shapiro, Ph.D.;	Erik W. Tayl	or; Paul A. Worsowicz
II. Name of lobbyist's pa	rtnership, firm or corporation, if any:		
	GALLAGHER, CALLAHAN & GARTRE	ELL, P.C.	
	(Name of partnership, firm or corporati	on)	
III. Name of Client N	NORTHERN PASS TRANSMISSION	Date Ja	nuary 30, 2019
lobbying, including fees fo	of all fees received from the client identified above r services such as public advocacy, government rela ring legislation, and related legal work. The gross t	ations, or publi	c relations services,
a) Total of all fees received	d in this reporting period	a)	\$ \$
	d this calendar year, prior to this reporting period. total prior monthly reports for this calendar year.)	b)	\$34,585.50
c) Total of all fees received (Add lines a and b)	d to date.	¢)	\$34,585.50
d) Indicate the amount of a yet been paid.	any such fees that are due, but have not	d)	.00
fees. Separate reports are lobbyist(s)/firm that are unare to be reported in one or reporting period for salari expenses where the expension the cost was \$25.00 or less purchase of a ceremonial of statement of each individual covered by (a) (for example given to the subject of lob legislative reception). Exp	nerships, firms, or corporations are required to re- to be filed for expenditures made relative to each correlated to any one client a separate report may be of three categories of expenses: (a) the aggregates, benefits, support staff, and office expenses; (diture was of \$25.00 or less (for example: meals particularly provided by the support of the	lient and if exp filed for the k ate total of all (b) the aggregiourchased durin that is given to of \$25.00 or greater than \$ 25, purchase of ater than \$50,	penditures are made by the bebyist(s)/firm. Expense expenses paid during the ate total of all individual ag a business lunch where the person being lobbied less); and (c) an itemized 25.00 for any purpose not a ceremonial object to be restaurant expenses for
support staff, and office ex	es for this reporting period for salaries, benefits, penses, related directly or indirectly to lobbying.	a) \$ b) \$.00
b) Total aggregate of expe in a), of \$25 or less.	enditures during this reporting period, not reported	_	.00
c) Total of all itemized exp	penditures reported in detail in section VI.	c) \$.00

Client: NORTHERN PASS TRANSMISSION d) Total expenses for this reporting period. (Add lines a, b and c.) d) \$.00 e) Total of expenses paid this calendar year, prior to this reporting period. (This should be the amount on line f of addendum A for last month's report.) e) \$ 33,740.50 f) \$ 33,740.50 f) Total of all expenses year to date. VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying fees during this reporting period, including by whom paid or to whom charged. Paid to: Amount Sworn Statement/Affirmation by Lobbyist 1 have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

Lobbyist Fees & Expenses, Addendum A - Page 2

Donald J. Pfundstein
(Print Name of Lobbyist)

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist

Statement of Inc	ome and Expenses for:		
Name of Lobbyin	g partnership, firm or corpo	ration: GALLAGHER, CA	LLAHAN & GARTRELL, P.C.
Name of Client (le particular client):	eave blank if Statement is fo Nortbern Pass Transm		orporation and not related to any
Date of Report (c.	heck one):		
April 25, 2018 🗆	July 25, 2018 🗖	October 31, 2018 🗆	January 30, 2019 🔀
		e Statement of Income and Enternent (insert the number o	xpenses described above, and the f Addendum forms being
1 Addendum A	A(s).		
0 Addendum I	B(s).		
0 Addendum (C(s).		
· · · · · · · · · · · · · · · · · · ·	affirm that the foregoing intest of my knowledge and be		and each Addendum is true and
(Signature of Lob	obvist)		1/21/19 (Date)
Lisa K. Shapiro,	•		, , (Sate)
(Print Name of le			

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist

Statement of Income and Expenses for:					
Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C.					
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Northern Pass Transmission					
Date of Report (check one):					
April 25, 2018					
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):					
1 Addendum A(s).					
0 Addendum B(s).					
0 Addendum C(s).					
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.					
(Signature of Lobbyist) (Date)					
Erik W. Taylor (Print Name of lobbyist)					

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist

Statement of Income and Expenses for:					
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Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Northern Pass Transmission					
Date of Report (che	ck one):				
April 25, 2018 🗆	July 25, 2018 🗖	October 31, 2018 🗆	January 30, 2019 🗵		
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):					
1 Addendum A(s	3).				
0 Addendum B(s	e).				
0 Addendum C(s	.				
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.					
(Signature of Lobby	Worsowing rist)	<u></u> -	(Date)		
Paul A. Worsowicz (Print Name of lob)					